

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMP

	O.M.D.T.	I NO TILE
	OMB Number:	3235-0076
	Expires:	May 31, 2005
	Estimated average	e burden
h /	hours per respons	e16.00
//-/		
151	SECTIO	E ONIL V

	SEC USE	ONLY
CURITIES STATION D, WAS A SO S	Prefix	Serial
G EXEMPTION D.C.	DATE REC	CEIVED

Name of Offering Private Placement of Member	(□ check if this is an amendment and name ship Units	has changed, and	l indicate change	··) 12	80595		
Filing Under (Check box(es) that Type of Filing:   New Filing □		☐ Rule 505	☑ Rule 506	☐ Section 4(6)	□ ULOE		
	A. BASIC IDENTI	IFICATION DA	ΛΤΑ				
1. Enter the information requeste	d about the issuer						
Name of Issuer ( check if this is	an amendment and name has changed, and indica	ate change.) Link	s at Valley Oaks l	LLC			
Address of Executive Offices	(Number and Street, City, State, Zip 901 Begonia Road, Celebration, FL		Telephone 407-	hone Number (Including Area Code)			
Address of Principal Business Oper (if different from Executive Officer		Code)	Telephone	Number (Including A	Area Code)		
Brief Description of Business real estate development					FEB 1 9 2004		
Type of Business Organization  ☐ corporation  ☐ business trust	☐ limited partnership, already formed☐ limited partnership, to be formed	⊠ other (	(please specify): l	imited liability compa	THOMSON FINANCIAL		
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or Org	oration or Organization: ganization: (Enter two-letter U.S. Postal Service : CN for Canada; FN for other foreig	1 2 abbreviation for S		☑ Actual □ Estima	ated		

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

{OR710908;1}SEC 1972 (6-02)Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	□ Director	☑ General and/or Managing Partner	
Full Name (Last name first, if inc CBD DEVELOPMENT, INC.	lividual)					*********
Business or Residence Address ( 803 Birchfield Drive, Mt. Laurel		City, State, Zip Code)				
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if ind Waronker, David A.	lividual)					
Business or Residence Address ( 901 Begonia Road, Celebration,		City, State, Zip Code)				
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if ind Baird, David	lividual)					
Business or Residence Address ( 10 Grove Street, Suite C, Cherry		City, State, Zip Code)				-
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if inc J.G. Wood Enterprises, LLC	ividual)	***************************************				
Business or Residence Address ( 66 E. Main Street, Suite 1-G, Mo						
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner	***************************************
Full Name (Last name first, if inc Cantwell, Jeffrey	dividual)					
Business or Residence Address ( 28 Cove Road, Morristown, NJ 0		City, State, Zip Code)				-
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if inc James Picanza	lividual)					
Business or Residence Address ( 66 E. Main Street, Suite 1-G, Mo						
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner	richiologia.
Full Name (Last name first, if inc James Wood	divídual)					-
Business or Residence Address ( 66 E. Main Street, Suite 1-G, Mo					11-11-11-11-11-11-11-11-11-11-11-11-11-	
	(Use blar	k sheet, or copy and use a	dditional copies of this sheet.	as necessarv.)		**********

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
				Answe	er also in A <sub>l</sub>	ppendix, Co	olumn 2, if i	iling under	ULOE.			
2. What	is the mini	imum inves	tment that	will be acc	epted from	any individ	ual?					\$ 0
3. Does	the offerin	g permit jo	int ownersh	nip of a sing	gle unit?		•••••					Yes No ⊠ □
comr If a p or sta	mission or s erson to be ates, list the	similar rem listed is ar name of th	uneration for associated ne broker of	or solicitati I person or r dealer. If	on of purch	asers in con roker or de ive (5) pers	nection wit aler register ons to be lis	h sales of se ed with the	or indirectly curities in the SEC and/or ciated person	ne offering. with a state		
Full Nar	ne (Last nar	me first, if ir	ndividual)									
Business	s or Residen	ce Address	(Number ar	nd Street, Ci	ty, State, Zip	Code)						
Name of	f Associated	Broker or I	Dealer									
States in	Which Per	son Listed F	las Solicited	d or Intends	to Solicit Pu	rchasers			,			
(Check '	"All States"	or check in	dividual Sta	tes)								☐ All States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VI]	[VA]	[WA]	[wv]	[M1]	[W1]	[PK]
Full Nar	ne (Last nar	ne first, if ir	ndividual)									
Business	s or Residen	ce Address	(Number ar	nd Street, Ci	ty, State, Zip	Code)						
Name of	f Associated	Broker or I	Dealer									
States in	Which Per	son Listed F	Ias Solicited	d or Intends	to Solicit Pu	rchasers					· · · · · · · · · · · · · · · · · · ·	
(Check	"All States"	or check in	dividual Sta	tes)		• • • • • • • • • • • • • • • • • • • •	•••••		•••••	•••••		☐ All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nar	ne (Last nai	ne first, if ir	ndividual)									
Busines	s or Residen	ice Address	(Number ar	nd Street, Ci	ty, State, Zip	Code)						
Name of	f Associated	Broker or I	Dealer					the state of the s				
States in	Which Per	son Listed F	las Solicited	d or Intends	to Solicit Pu	rchasers						****
(Check	"All States"	or check in	dividual Sta	tes)	******************		*******	*****		••••		☐ All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

B. INFORMATION ABOUT OFFERING

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
Type of Security		Aggregate fering Pric		Am	ount Already Sold
Debt		icing File		\$	0
Equity					
☐ Common ☐ Preferred	Ψ		Ū	Ψ	
Convertible Securities (including warrants)	c		^	¢	0
Partnership Interests					0
Other (Specify) LLC Membership Interests					
Total					0
Answer also in Appendix, Column 3, if filing under ULOE.	\$	4,750,0	00	\$	0
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
		Number Investors		Do	Aggregate llar Amount Purchases
Accredited Investors			_8	\$	4,750,000
Non-accredited Investors				\$	
Total (for filings under Rule 504 only)					
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					
Type of offering		Type of		Dol	lar Amount
Rule 505		Security		e	Sold
Regulation A					
Rule 504					
Total			_	\$	
10141			_	\$	<del></del>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		•••••	×	\$	0
Printing and Engraving Costs			×	s s	_
Legal Fees			×	•	55,000
Accounting Fees				\$	55,000
Engineering Fees			×	\$	3,000
Sales Commissions (specify finders' fees separately)			×	\$	350,000
Other Expenses (identify)			×	\$	0
			<b>⊠</b>	\$	0
Total	**********	********	$\boxtimes$	\$40	08,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross \$4,342,000 proceeds to the issuer." 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Payments To Affiliates Others 120,000 Salaries and fees Purchase of real estate ..... 4,000,000 Purchase, rental or leasing and installation of machinery ⊠ \$\_ and equipment ..... ⊠ \$ Construction or leasing of plant buildings and facilities...... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another ⊠ \$ issuer pursuant to a merger) 0 ⊠s Repayment of indebtedness ..... ⊠ \$ Working capital ..... Other (specify):surveying, soil testing/borings, PUD Application/Habitat study, Concept Plans, permitting, insurance, travel, political contributions, project coordination, equity fee, title 120,000 ⊠ \$ 102,000 transfer.

D. FEDERAL SIGNATURE

**⊠** \$

240,000

\$4,324,000

☑ \$ 4,102,000

Column Totals .....

Total Payments Listed (column totals added)

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date	1/ 、 /	
Links at Valley Oaks LLC			131/04	
Name of Signer (Print or Type)	Title of Signer (F	Print or Type	A. WARDNER	
David A. Waronker	President of Man	aging Member	A. WARONKER	

ATTENTION	
Intentional misstatements or omissions of fact constitute federal criminal violations, (See 18 U.S.C. 1001.)	•
	and the second second second

arrivid Raubidhiya	L STAIL NUMBER OF THE PROPERTY		E. H. Hilbell
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No 🗵
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice (17 CFR 239.500) at such times as required by state law.	otice on	Form D
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished offerees.	l by the	issuer to
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the U Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability exemption has the burden of establishing that these conditions have been satisfied.		
	suer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by uthorized person.	the unde	ersigned
Issuer	(Print or Type) Date		
Links	at Valley Oaks LLC	24	
Name	(Print or Type) Title (Print or Type)		

President of Managing Member

David A. Waronker

# APPENDIX

Intend to sell to non-accredited to non-accredited investors in State   Offering price of level in state (Part E-Item 1)   Offering price of level in state (Part E-Item 2)   Offering price of level in state (Part E-Item 2)   Offering price of level investors in State   Offering price of level investors   Offering p	2 3						2		4								5 Disqualification		
State         Yes         No         Accredited Investors         Amount         Non-Accredited Investors         Amount         Yes         Amount         Yes         Amount         Yes         Amount         Yes         Amount         Yes	ar of of	redited n State	n-acci	to non-acc	to in		accredited rs in State	ar or of	nd aggregate fering price fered in state	amount purchased in State							under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
AK		No		Yes	Y	te	No			Accredite	ed	Amount	No	n-Accredite	ed	Amount	Yes	No	
AZ         AR         AR<																			
AR         Image: Control or contr																			
CA						:													
CO	·																		
CT										<u> </u>									
DE				-		•													
DE						,			<del> </del>										
FL GA																			
GA						:													
HI																			
ID																			
IL       IN       LA       KS       KY       LA       ME       MD       MA       MI																			
IN																			
IA												,							
KS										**************************************									
KY																			
LA																			
ME						,													
MD																			
MA																			
MI .	*****					,			510 TOTAL STATE OF ST										
												,,,							
MN																			
MS																	-		

	Intendent to non-actinvestors (Part B-	to sell credited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО								•	
MT	· · · · · · · · · · · · · · · · · · ·		1 10 110 110 110 110 110 110						
NE							<u> </u>		
NV									
NH									
NJ	WIN WIN			8	4,750,000	0	0		
NM									
NY									
NC									
ND									
ОН									
ок									
OR									
PA									
RI									
SC									
SD									
TN									
TX							†		
UT	<u></u>								
VT									
VA							-		
WA									
wv									
							1		

				APPENDI				าสังเหตุกรณ์	
1	Intend to non-acconvestors (Part B-I	credited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									